



Solicitation Information
April 21, 2015

RFI# 7549521

TITLE: State of Rhode Island Customer Service Program

Submission Deadline: Tuesday, May 7, 2015 at 10:30 AM (ET)

SURETY REQUIRED: No

BOND REQUIRED: No

David J. Francis
Interdepartmental Project Manager

Applicants must register on-line at the State Purchasing Website at www.purchasing.ri.gov

Note to Applicants:

Offers received without the entire completed three-page RIVIP Generated Bidder Certification Form attached may result in disqualification.

THIS PAGE IS NOT A BIDDER CERTIFICATION FORM

Table of Contents

Table of Contents

1.0 INTRODUCTION.....3

 1.1 Instructions and Notifications to Offerors.....3

2.0 RFI for Information5

 2.1 Requirements and Responses..... 5

 2.2 Introduction 6

 2.3 Purpose of this Request for Information 6

 2.4 Background 6

 2.5 Project Overview..... 7

3.0 Content of Response 11

Appendix A: Background Data 15

1.0 INTRODUCTION

The Rhode Island Health Benefits Exchange or HealthSource RI (“HSRI”) in the Department of Administration, The Rhode Island Office of the Health Insurance Commissioner (OHIC), Executive Office of Health and Human Services (EOHHS), under which Medicaid is a branch, are jointly soliciting responses from qualified entities to explore how the State of Rhode Island could improve its contact center operations and Navigator programs for its health insurance programs, including HealthSourceRI and Rite Care.

This is a Request for Information (RFI). No award will be made as a result of this solicitation.

1.1 INSTRUCTIONS AND NOTIFICATIONS TO OFFERORS:

1. Potential vendors are advised to review all sections of this RFI carefully and to follow instructions completely, as failure to make a complete submission as described elsewhere herein may result in rejection of the proposal.
2. The State invites feedback from the community on any questions posed in this RFI. Please note it is not a requirement to answer all questions.
3. Alternative approaches and/or methodologies to accomplish the desired or intended results of this RFI are solicited.
4. This is a Request for Information (RFI), and as such no award will be made as a result of this solicitation.
5. All costs associated with developing or submitting responses to this RFI, or to provide oral or written clarification of its content shall be borne by the vendor. The State assumes no responsibility for any costs.
6. Responses misdirected to other state locations, or which are otherwise not present in the Division at the time of opening for any cause will be determined to be late and will not be considered. For the purposes of this requirement, the official time and date shall be that of the time clock in the reception area of the Division.
7. Respondents are advised that all materials submitted to the State for consideration in response to this RFI will not be considered to be Public Records as defined in Title 38, Chapter 2 of the General Laws of Rhode Island. The responses may only be released for inspection upon RFI once an award of a subsequent procurement has been made, as long as the release will not place the State at a competitive disadvantage in its sole discretion.

8. Interested parties are instructed to peruse the Division of Purchases website on a regular basis, as additional information relating to this solicitation may be released in the form of an addendum to this RFI.

9. Equal Employment Opportunity (G.L. 1956 § 28-5.1-1, et seq.) – § 28-5.1-1 Declaration of policy – (a) Equal opportunity and affirmative action toward its achievement is the policy of all units of Rhode Island state government, including all public and quasi-public agencies, commissions, boards and authorities, and in the classified, unclassified, and non-classified services of state employment. This policy applies to all areas where State dollars are spent, in employment, public services, grants and financial assistance, and in state licensing and regulation. For further information, contact the Rhode Island Equal Opportunity Office at (401) 222-3090.

10. In accordance with Title 7, Chapter 1.2 of the General Laws of Rhode Island, no foreign corporation, a corporation without a Rhode Island business address, shall have the right to transact business in the State until it shall have procured a Certificate of Authority to do so from the Rhode Island Secretary of State (401-222-3040). This is a requirement only of the successful vendor(s).

11. The vendor should be aware of the State's Minority Business Enterprise (MBE) requirements, which address the State's goal of ten percent (10%) participation by MBE's in all State procurements. For further information, visit the website www.mbe.ri.gov .

2.0 Request for Information

This RFI outlines the type of information being solicited from potential respondents and includes guidelines for content and format of responses.

2.1 REQUIREMENTS AND RESPONSES

2.1.1 RESPONSES

Submit one (1) original and two (2) copies, and one electronic copy of responses by the date and time stated on page one of this RFI. Submissions should be single spaced on 8 ½” by 11” pages with 1” margins using Times Roman 12 font.

Responses (an original plus two (2) copies/one electronic copy) must be mailed or hand-delivered in a sealed envelope marked “RFI#” to:

RI Department of Administration
Division of Purchases, 2nd floor
One Capitol Hill
Providence, RI 02908-5855

NOTE: Responses received after the above-referenced due date and time will not be considered. Responses misdirected to other State locations or those not presented to the Division of Purchases by the scheduled due date and time will be determined to be late and will not be considered.

Responses faxed, or emailed, to the Division of Purchases will not be considered. The official time clock is in the reception area of the Division of Purchases.

Based on the responses, Rhode Island may invite a vendor to present their approach and demonstrate their technical solution.

2.2 Introduction

The Rhode Island Division of Purchases (“Division”), on behalf of the State of Rhode Island (“State”, “Rhode Island”, or “RI”), is issuing this Request for Information (“RFI”) to solicit specific information about how the State of Rhode Island could improve its contact center operations and Navigator programs for its health insurance programs, including HealthSourceRI and Rite Care. HealthSource RI (HSRI) is the State of Rhode Island’s Health Insurance Marketplace, established under the requirements of the federal Affordable Care Act. HSRI opened its doors in October 2013 as one of 13 State Based Exchanges in the country.

2.3 Purpose of this Request for Information

This RFI is specifically seeking to discover information regarding Business Partners who could successfully provide customer service for our call and walk in center as well as operations support for the organization, as well as input from other who have expertise in this area but might not be interested in being a direct Business Partner with the state. We seek to get the best advice possible about how to design our contact center and Navigator Program, and how to structure our relationship with any relevant vendors, to provide maximum customer service within the limits of our future budget.

HSRI and EOHHS will use findings generated by this RFI, in conjunction with other available information, to develop options and solutions for improving the quality and efficiency of future contact center operations, as well as future in-person assister and navigator functions. The appendix to this RFI provides basic information on the State’s Contact Center and Navigator Program, including a description of existing operations, volumes, and budget needs.

2.4 Background

HSRI and the Executive Office of Health and Human Services (EOHHS) jointly fund a Customer Service program, which includes a contact center and assister program to serve Rhode Islanders seeking health insurance coverage. The contact center offers Rhode Island citizens the opportunity to identify eligibility and enroll into the health insurance program that meets the financial and coverage needs of any individual, family, employer group or employee. Through the contact center, Rhode Islanders may enroll in coverage in a wide spectrum of programs including Medicaid, a Qualified Health Plan or a Dental Plan and may be able to access full Medicaid funding, federal premium tax credits and cost sharing reductions. HSRI and EOHHS also jointly fund in-person assisters and navigators who assist Rhode Island residents in obtaining coverage under the state’s Navigator, or community based assistance Program. The Contact Center and the Navigator Program fulfill the customer assistance mandate laid out in the Affordable Care Act.

HSRI is in the process of transitioning from a development and implementation phase, fully funded with federal funds, to ongoing operations, which must be fully supported by state funds.

As part of this transition, we have been asked to dramatically reduce our operating budget and examine all areas of operations for potential cost savings in the future. Likewise, EOHHS has been asked by the Governor to examine all areas of Medicaid operations for potential cost savings as part of an effort to address short-term budget shortfalls and develop a sustainable long-term state budget.

We also recognize an imperative to improve service to our customers. HSRI and Medicaid are supported by an integrated eligibility system that provides for a “single door” to Medicaid and qualified health plans. The integrated eligibility system was operationalized in phases, with the first phase addressing the needs of HSRI and new Medicaid eligibility requirements. Later phases will expand on this platform to include eligibility for other health and human services programs. To date the system has experienced numerous functionality defects, which have resulted in a much higher level of manual workarounds than originally anticipated. This has directly affected the contact center, resulting in higher customer contact volumes and associated costs than projected when the State originally procured a contact center contract in the summer of 2013, and resulting in less-than-optimal customer service.

2.5 Project Overview

Changing Philosophy

HSRI and EOHHS are seeking to deliver a higher quality, lower cost customer experience. We are currently reviewing our contracts to reassess how our vendors can help us achieve better outcomes. We believe that we need to change our service delivery model and vendor relationship to better align interests, by moving to an outcome-based model. We therefore are contemplating moving away from the traditional, exchange of fee-for-service (“vendor”) model, to more of a “Business Partnership.” This may require organizational, cultural, and procedural changes to support a more strategic relationship and requiring shared ownership and execution of a well-planned strategy. We are interested in learning how best to partner in delivering the best possible service at certain price points.

We are seeking expert input on such general issues as:

- How can we better define deliverables and/or more effectively measure and monitor vendor performance to assure that we are getting the desired outcomes from our contracts?
- How can we structure incentives to encourage the highest possible performance from our contractors?
- How can we form more effective partnerships within the community to maximize the impact of our customer assistance efforts?

The following sections of the RFI describe our current contractual requirements and contractor responsibilities.

Operational Requirements

The Walk In Center and Inbound Call Staff support the customer in the following functions:

- Customer Education
- Product/Plan Shopping
- Eligibility determinations
- Enrollment
- Payments
- Billing Inquiries
- Enrollment updates and Account Maintenance (e.g. changes in income, status, dependents)
- 1095 Tax Form Filing

HSRI's community-based Assister programs, operating in partnership with EOHHS, which includes the Navigator and Certified Application Counselor programs, provide outreach and in person enrollment assistance for our customers including the following functions:

- Conduct public education activities
- Raise awareness of the availability of Qualified Health Plan's, cost share reductions and premium tax credits.
- Facilitate enrollment in Qualified Health Plans and the Rite Care program
- Assist consumers in understanding health insurance choices in a fair, accurate, impartial way.
- Provide information in a culturally and linguistically appropriate manner.

The Back Office Operations support the following functions:

- Case management of complex issues
- Escalated customer issues
- Appeals
- Exemptions
- Complaints
- Refund Requests
- Special Enrollment Periods
- Enrollment Reconciliations with Carriers
- Verifications
- Special Projects
- Email, chat, mail, scanning
- Analysis and triage of technical issues to IT Business Partner
- Data and Reporting

The Training and Quality Assurance Team support the following functions:

- New hire and refresher training for all staff, including community based assisters
- Updates to on line information database used by Staff
- Making sure all customer-facing staff is up to date on new, changing information and most effective way to communicate to them.
- Monitoring and scoring calls so that staff can be evaluated and coached

Our contractor’s responsibilities also include:

- Hiring, training, scheduling, supervising and performance management of customer service team, including annual training and certification of community-based Navigators and Certified Application Counselors.
- Collaboration with and triage to existing state agency info lines (OHIC, Medicaid, DHS) to provide seamless, integrated consumer support.
- Use of the integrated eligibility system developed through Rhode Island’s Unified Health Infrastructure Project (UHIP).
- Hiring and developing a local work force, or agencies within the community.
- Reporting on performance, including quality monitoring, tracking calls or visits, service level monitoring, customer satisfaction surveys, etc.
- Provide an exceptional customer experience leveraging those factors within their purview to assist the customer
- Demonstrate high customer satisfaction through surveys, positive customer feedback and good public reputation for HSRI in the state of RI.
- Identify and report back to HSRI and EOHHS on patterns and trends on customer problems or operational issues.
- Provide accessible customer service to individuals with disabilities and to individuals with various language needs
- Be able to service a variety of customer groups with different levels of complexity (e.g. Exchange individuals and families, Medicaid individuals and families, Small Businesses and their employees).
- Accommodate co-located state staff (up to 25 state staff from different agencies; HSRI, EOHHS and DHS).
- Development and use of social media (future).
- Maintain Assister program performance profiles; make sure individuals and agency partners are meeting requirements for training, certification, performance, accountability.
- Oversight for Navigator program including compensation/grants to community-based entities in compliance with appropriate ACA regulations; must enforce conflict of interest protections.
- Collaborate with HSRI, its vendors and other state and community agencies to provide seamless, integrated consumer service.

Service Levels

The State seeks Business Partner suggestions on the following key performance indicators, or service levels, and how these key performance indicators would be affected by varying levels of budgetary constraints:

- Customer Satisfaction
- Customer Resolution
- Average Speed of Answer (ASA)
- Abandonment Rate
- Establish baseline for Average Handle Time, Talk Time, Research Time, Hold Time
- Response time to emails and chat
- Turnaround and response times on customer issues
- Staffing Ratios

The above list serves as a sample and is not meant to be exhaustive or required. Respondents are encouraged to suggest other service level measures that would help HSRI achieve its objectives of serving State citizens in a manner that is responsive to customer needs such that it reflects well on the HSRI as a quality public service providing service levels at, or beyond, public expectations. We encourage creative ideas.

Technology Needs

The State of Rhode Island Integrated Eligibility and Enrollment system, or UHIP Technology system includes more than just eligibility technology. The technology also supports the management of the Exchange's non-eligibility functions, such as billing and payment, financial management and federal reporting. We need to learn about the most efficient customer support technology necessary to run the Contact Center. For example:

- What technology is available and what are some of the important or unique features and functionalities of that technology?
- We know the basic functionality of a CRM, but would like more information on additional functionality, such as workflow management, data and reporting features, call back functionality, auto dial and customer survey capabilities, etc.
 - Same concept applies to Knowledge Base tools (which store information necessary to answer customer inquiries), Integrated Voice Response (IVR), Automated Call Distribution (ACD), Workflow Management, Tracking of customer resolution and aging, Reporting, Document Management functionality, etc.
 - Rhode Island would like to hear from qualified Vendors what is the most cost efficient way to deploy these types of technology?
- Would such platforms require integration with RI's Integrated Eligibility and Enrollment system in order to function, or would these be two separate programs running on an agent's desktop?
- Please explain the optimal approach to tracking and logging customer contacts, any workflow management capabilities, tracking tools and reporting functionality.

We are seeking advice from experts in the field on how Rhode Island might restructure the above requirements, to create a simplified and efficient system for tracking customer contacts and issue resolution.

Future Budget Information

HSRI expects the unified eligibility system to achieve a stable state by the end of the third open enrollment period in early calendar year 2016. To date, funding has come from federal sources. Full State funding begins in FY17, when HSRI operations must be sustainable and affordable.

Upon stabilization, HSRI and EOHHS anticipate that the high volumes of customer contacts will decrease; facilitating increased customer service levels at a lower annual cost. We are specifically interested in assessing the potential level of customer service at three potential annual budget levels:

- \$6 million
- \$8 million
- \$10 million

3.0 Content of Response

The following outline (and suggested page counts) is intended to minimize the effort of the respondent and structure the response for ease of analysis. The listed questions can be used to guide responses; please note that an answer to each question is not required. **Concise responses** are appreciated.

Respondents who are interested in being a potential Business Partner should provide estimated service levels that could be achieved within a budget defined by the State. In addition, we seek to learn from interested Business Partners about the technology they can provide to support the Contact Center operations, as well as any requirements or suggestions on integration with HSRI technology. Interested Business Partners should also provide examples where they have had to work in close collaboration with other Business Partners in support of a client, identifying major obstacles and how they were able to overcome them and achieve a successful result.

Respondents who are interested in providing feedback on just Contact Center operations, or just the Navigator (community based assistance) program should feel free to provide a response to either or both of those pieces of our Customer Service program.

Respondents who are not interested in being Business Partners but are willing to share advice about the issues at hand are encouraged to do so. We value your expertise and input.

Section 1 Business Partner Profile (1 page)

Please provide a brief description of your organization, including key people, their qualifications, experience and background in providing creative solutions.

Section 2 Past Experience/Qualifications/Insights (2 pages)

Please explain your experience and familiarity with operating a contact center or operational support services for a customer service program. Describe the industry or industries that you are most familiar with. What are your qualifications in this area? Do you currently operate a contact center, or provide staffing or support services for a contact center? If so, which industry do you provide these services?

Section 3 Philosophy/Process: Contact Center Operations and/or Navigator Approach (5 pages)

Please address any or all of the following questions regarding how best to structure our relationship with a customer service business partner in the future:

- What does it mean to you to be a Business Partner?
- How do we best align interests?
- What capabilities are required to make this shift?
- How willing are vendors to engage in strategic relationships?
- Can we expect investment and continued innovation in our Customer Service program at a lower budget?
- How do you suggest we measure success?
- How do we best ensure accountability?
- How can we be flexible in contracting to meet changing needs?
- How do we achieve superior service and customer satisfaction on a limited budget?
- How would you approach this situation differently from other situations or other firms?
- What other important questions should we be asking?

Your response may include the suggested business model, staffing, and operational infrastructure to support RI's needs. This also may include any of the following components/functionalities: contact center infrastructure, agent specialization, agency oversight of contact center, forecast of call volume, identifying staffing needs, cost to run contact center, optimal hours, integration with other contact centers, resources and training to support contact center staff, specialized software solutions, etc.

Responses may include a description of:

- Customer Service infrastructure; triage levels within a call center; triage process?

- What is the industry standard around call center hours? What hours are optimal for servicing consumers (e.g. combination of day, evening, weekend)? What kind of after hour support would you suggest?
- Customer service experience/philosophy
- Staffing model; hiring standards, employee profile, scheduling and forecasting, leveling by knowledge base, skill or experience, initial/continuing training and career path for staff
- Approach to challenges inherent to staffing a call center and/or Navigator program; how to avoid turnover, staff burn out, poor service, performance issues, maintain training and staff support.
- How best to work with other Business Partners
- Most relevant (achievable/affordable) service levels (compare to industry standards)
- Services for the deaf/hearing impaired, and those who speak different languages
- Hours of operation
- Performance analytics: What is the best way to measure and assess contact center performance? How would you go about analyzing customer service needs and satisfaction? Which metrics encourage the proper customer outcomes?

Given the drive to reduce costs as we plan for FY17, critical to your description of approach will be a service model plan, with service levels that can be achieved at the following alternate budget levels: \$6 million, \$8 million, \$10 million per year. This constraint can be described either summarized in this section, or detailed in Section 8, but we are looking for creative ways to maximize service levels at significantly reduced cost and compare plans on the basis of approach, service levels and cost.

Section 4 Integration with Rhode Island’s technology platform (2 pages)

Please describe how best Contact Center staff and operations would utilize a technology platform and deliver strong consumer support.

- What is the best way to coordinate with the state’s technology?
- What technology do you suggest for telecomm, CRM, other?
- Do you recommend use of proprietary software?
- Can you describe alternative technology services and costs?

Section 5 Integration with other customer service areas (1 page)

Please describe ways in which our Contact Center telecommunications can best interact with and/or integrate with other customer service areas, phone lines or queues. It is the intent of EOHHS to eventually try and integrate other call centers throughout the EOHHS agencies into one unified call center and as a result we would like to get a response as to how this could be accomplished.

Section 6 Flexibility (1 page)

Please describe how we can adjust service capacity and flexibility of our Customer Service program as it relates to changes in enrollment over time and/or expansions to other populations.

- How do we best handle much higher or much lower call volume or in person visits?
-

Section 7 *Methodology (2 pages)*

Please describe the optimal approach to implementation:

- What approach do you suggest in implementing a solution in Rhode Island?
- How long would it take to implement such a solution?
- Would we need other third party resources, alliances, relationships, or dependencies?

Section 8 *Feasibility and Cost Assessment (1 page).*

Please see attached chart to be completed by interested Business Partners.

Please comment on the feasibility and costs of implementing alternative solutions, including estimates of the amount of time, money, and resources needed, under the budget constraints summarized in Section 3:

- What should be included (or not) in the estimates?
- What pricing model (fixed, per employee per month, per phone call, per member per month, per application, per outreach event, other performance metrics, etc.) incents maximum customer satisfaction? We would like to see three or more pricing options, with pros and cons of each described in summary detail.
- Are there any components (operations/staffing) that the State would need to procure separately?

Disclaimer

This Request for Information is solely for information and planning purposes and does not constitute a Request for Proposal. All information received in response to the RFI and marked as “Proprietary” will be handled accordingly. Responses to the RFI cannot be accepted by the State to form a binding contract. Responses to the RFI will not be returned. Respondents are solely responsible for all expenses associated with replying to this RFI.

APPENDIX A: Background Data

Contact Center

The Contact Center supports individuals, families, small businesses and their employees as they shop for health coverage and determine eligibility into the appropriate health coverage program (RiteCare, a qualified health plan (QHP) or Small Business plan). The Navigator program supports individuals and families, but does not support Small Businesses and their employees.

Multiple customer service channels have been established and are supported at the Contact Center. They are: self-service website, phone, walk in center, email, web chat and mail. All channels use agency websites and Rhode Island's integrated eligibility system to assist customers.

Assister Programs

HealthSourceRI, in partnership with EOHHS, supports in person community-based assistance for individuals and families through the Navigators and Certified Application Counselors¹ programs. Navigators and Certified Application Counselors are trained and certified to be a no "wrong door" source of information for Rhode Islanders as they learn about their eligibility for affordability programs and apply for coverage through HSRI.

Each type of assistance, guided by ACA regulations, provides in person assistance to customers across diverse community-based settings that reflect Rhode Island's geographic, linguistic and cultural diversity. Key differences between the CAC and Navigator program include but are not limited to the following:

- Navigators, operating within diverse agency settings and in the community at enrollment and related events, are paid to provide in person enrollment and outreach to consumers. Navigators currently have access to online dashboards to better assist repeat appointments with customers and use a dedicated phone number to obtain assistance at the Contact Center.
- Certified Application Counselors provide unpaid in person application assistance to consumers in diverse community-based settings including local government, nonprofit agencies and healthcare focused organizations. Counselors do not retain a consumer online

¹ HealthSource RI (HSRI) uses a variety of programs to enhance its outreach and education efforts, including Navigators, In-Person Assisters and Certified Application Counselors ("CAC's") as certified by HSRI. The rules pertaining to these programs can be found at 45 CFR §155.210; 45 CFR §155.215 and 45 CFR §155.225. For the sake of simplicity, HSRI refers in-person assisters and navigators jointly as "Navigators."

dashboard and do not currently have access to the Navigator dedicated phone line.

All Assisters must be trained and re-certified annually, including a recertification test, annually. As the CAC program being relatively new, training and certification for this program is ongoing in order to promote expansion of this assistance type.

October 2013-Present

Contact Center

HSRI opened on October 1, 2013. Currently, the phones and walk in center are open 7 days a week; Monday through Saturday from 8:00 am – 9:00 pm and Sunday from 12:00 am - 6:00 pm. Spanish, Portuguese and English languages are supported at the Contact Center, with a language line available for all other language needs.

The Contact Center is made up of 5 main areas of work:

1. Walk In Center
2. Inbound Calls
3. Outbound Calls
4. Back Office Operations
5. Training and Quality Assurance

Below is a summary of the customer volumes experienced at the Contact Center since opening that date.

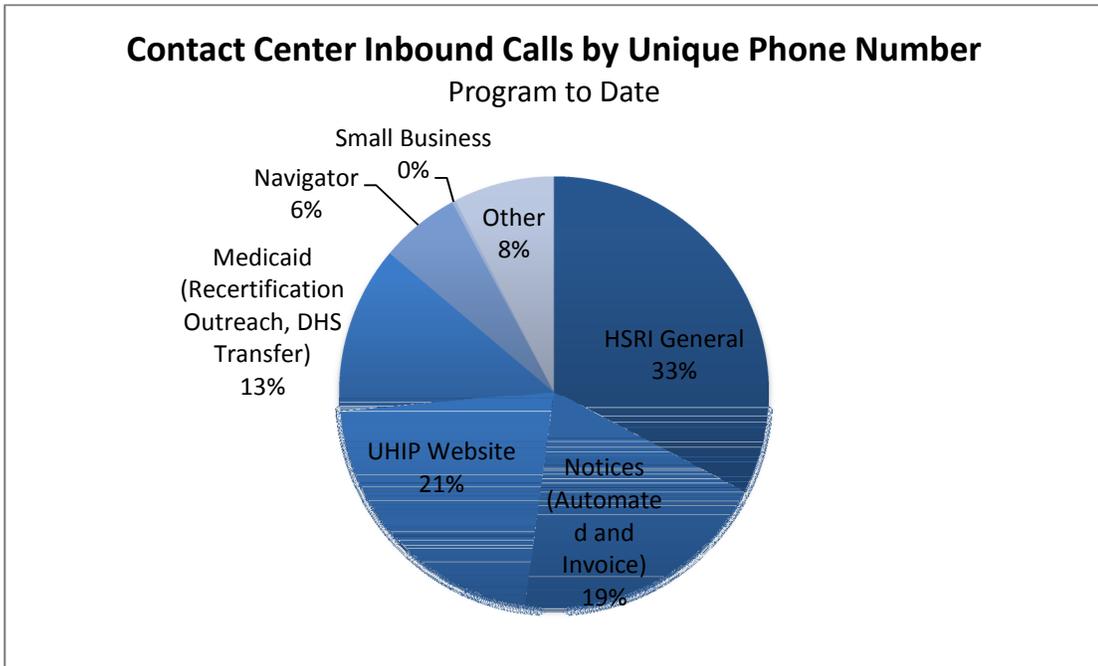
Program to Date Customer Volumes

October 1, 2013 – March 28, 2015 (18 months)

- Inbound phone calls received (offered): 844,636
- Contact center walk ins received: 65,436
 - A satellite walk in center in Warwick, RI was opened for the Open Enrollment season to help mitigate high walk in volumes at the contact center; an additional 4,407 walk ins were handled at the satellite center (1,212 during Open Enrollment 2014 and 3,195 during Open Enrollment 2015)
- Contact Center phone and walk in traffic is most prominently driven by the Open Enrollment Period, a scheduled period of time during which Individuals and Families are free to enroll in commercial coverage. Traffic increases during this season, peaking in December in correlation with the deadline to sign up for January effective commercial

coverage. Medicaid/CHIP renewal cycles also drive traffic on a monthly basis, and typically occur in planned phases. Customer service is available to individuals and families throughout the year, with enrollment assistance available to individuals qualifying for a special enrollment period outside of the Open Enrollment Period. Small business enrollment and Rite Care enrollment is ongoing throughout the year.

- Types of phone calls received
Contact Center phone calls can be segmented by type according to the unique telephone number dialed or the reported call disposition that is selected by a call center specialist to describe the nature of the call.



The table below shows the distribution of inbound calls by unique phone number and call disposition for the month of December 2014. As illustrated, the types of calls received vary somewhat by line, according to the particular needs of the customer population serviced.

December 2014 Inbound Call Summary		Lead Source					
Total Calls Received	HSRI General	Notices (Automated and Invoice)	UHIP Website	Medicaid (Recertification, Transfer DHS)	Navigator	Small Business (Employer, Employee, Broker)	All Other Lines
109,031	36,352	23,180	22,976	15,253	3,787	375	7,108
100%	33%	21%	21%	14%	3%	0%	7%

Call Type	HSRI General	Notices (Automated and Invoice)	UHIP Website	Medicaid (Recertification, Transfer DHS)	Navigator	Small Business (Employer, Employee, Broker)	All Other Lines
Benefit Questions	26%	27%	25%	33%	27%	10%	
Enrollment Completed	21%	22%	18%	3%	5%	3%	
Enrollment Assistance	12%	9%	10%	11%	12%	10%	
Customer Service	8%	7%	6%	12%	3%	4%	
Phone (-)	7%	6%	7%	20%	7%	4%	
Billing and Payment, ID Cards	6%	11%	7%	5%	2%	8%	
Health Care Reform Education	5%	4%	4%	3%	2%	9%	
Technical Assistance	4%	4%	13%	7%	37%	10%	
Make an Appointment/Message	3%	2%	1%	1%	0%	35%	
Other	8%	8%	8%	4%	3%	7%	
Total	100%	100%	100%	100%	100%	100%	

Note: Small Business Line "Make an Appointment/Message" category includes Transfers to Business Engagement Team

Assister Programs Size and Scope

July 2014 – February 2015

- Approximately 123 Navigators in 20 agencies provided in person assistance to consumers during the HSRI Second Open Enrollment period. (Nov 2014 – Feb 2015); as of 4.13/15, Rhode Island has 109 active Navigators.
- Over 4,000 individuals and families utilized the online Navigator search function to locate a navigator agency in their community during the second Open Enrollment period.
- Over 150 events across the state were organized, staffed or attended by Navigators dedicated to providing assistance at community events and other venues outside their agency (July 2014 – Feb 2015)
- 50 Certified Application Counselors from 14 agencies (Dec 2014 – present)
- Day to day management and training for these programs is currently provided by a contracted vendor, which we anticipate to continue through HSRI's third Open

Enrollment Period.

Anticipated: 2016 and Beyond

As noted, Assister programs are a partnership effort between HSRI and EOHHS currently supported by a combination of federal and state funds. We anticipate the following key changes to the program:

- Reduction in the overall size of Navigator program. Federal funds supporting a sizable portion of the Navigator program will end December 2015. Services currently supported with federal funds may continue in a reduced manner via other funding sources as yet undetermined.
- Double the size of the Certified Application Counselor program;
- 1-3 community agencies dedicated to Navigator outreach activities such as those described above.

Eligibility and Enrollment: HSRI and Medicaid

Individuals and families applying for coverage through the state's integrated eligibility and enrollment system may be determined eligible to purchase coverage through HSRI or obtain coverage through Medicaid.

More than 25,000 individuals purchased coverage through HSRI for 2014. During the second Open Enrollment Period, 82% of these individuals actively renewed to maintain their coverage for 2015, while an additional 9,150 new customers enrolled for 2015 coverage. As of the end of the second Open Enrollment Period, more than 30,000 individuals were enrolled in coverage for 2015.

An additional 3,500 lives (employees and their dependents) are enrolled in coverage through HSRI's SHOP, or small business market. 487 small businesses are enrolled in coverage, representing just over 2,000 employees.

Since October 1, 2013, approximately 235,000 Medicaid/CHIP eligibility determinations have been processed via the integrated eligibility and enrollment system.